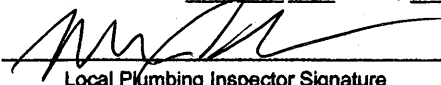
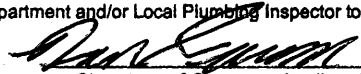
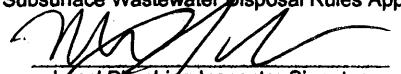


SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	LAMOINE	Town/City	LAMOINE Permit # 1729
Street or Road	COOLIDGE CROSSING ROAD	Date Permit Issued	5/13/14 Fee \$ 250 Double Fee Charged ()
Subdivision, Lot #		 Local Plumbing Inspector Signature	
OWNER/APPLICANT INFORMATION		L.P.I. # 1040	
Name (last, first, MI)	GARRISON, DAN	<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Town <input type="checkbox"/> State <input type="checkbox"/> Applicant	
Mailing Address of	61 N. PARKER ROAD	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with the application and the Maine Subsurface Wastewater Disposal Rules.	
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	MARLBORO, CT 06447		
Daytime Tel. #	(860) 622-8847	Municipal Tax Map #	1 Lot # 53A
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED	
I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.		I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.	
 Signature of Owner or Applicant		 Local Plumbing Inspector Signature	
5/16/14 Date		(1st Date Approved) (2nd Date Approved)	

PERMIT INFORMATION

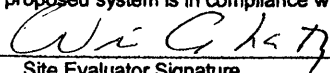
TYPE OF APPLICATION <input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. < 25% Expansion <input type="checkbox"/> b. ≥ 25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	DISPOSAL SYSTEM COMPONENT(S) <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY _____ sq. ft. 2 _____ acres	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 2 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____	TYPE OF WATER SUPPLY TO BE <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY 1000 gallons	DISPOSAL FIELD TYPE & SIZE <input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device _____ <input type="checkbox"/> a. Cluster Array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 600 sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW 180 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS PROFILE CONDITION 5 / C at Observation Hole # 1 Depth 30" OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium -- 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large -- 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large -- 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra Large -- 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input checked="" type="checkbox"/> 1. Not Required, SET HOUSE ACCORDINGLY <input type="checkbox"/> 2. May be Required <input type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	<input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at Center of Disposal Area Lat. 44° 28' 11" N Lon. 68° 19' 55" W If g.p.s., state margin of error 30' ±

SITE EVALUATOR STATEMENT

I certify that on 4-21-14 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

 Site Evaluator Signature WILLIAM A. LaBELLE, JR.	319 SE# (207) 537-5900 Telephone Number	4-28-14 Date labelleptic@rivah.net E-mail Address
Site Evaluator Name Printed	Telephone Number	E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation

LANDOINE

Street, Road, Subdivision

COOLIDGE CROSSING ROAD

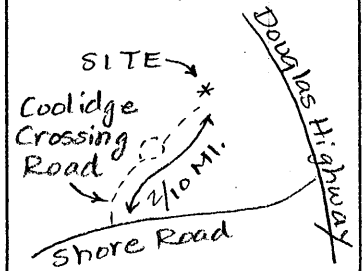
Owner or Applicant Name

DAN GARRISON

SITE PLAN

Scale 1" = 50 Ft.

SITE LOCATION PLAN
(Attach map from Maine Atlas
for First Time System Variance)



(SEE ATTACHED SITE PLAN)

SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above or on pg. 2A)

Observation Hole #1 ■ Test Pit □ Boring

4" Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
LOAMY FINE SAND		DARK YEL. BROWN (10YR 3/4) YEL. BROWN (10YR 5/4)	
VERY FINE SAND	FRIABLE	LIGHT YELLOWISH BROWN	N.E.
"DEAD SAND"	FIRM	(2.5Y 6/4)	

Soil Profile 5 C
Classification Condition
Slope 0%
Limiting Factor 30" Depth
Ground Water Restrictive Layer Bedrock Pit Depth

Observation Hole #2 ■ Test Pit □ Boring

4" Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
LOAMY FINE SAND		DK. YEL. BROWN (10YR 3/4) DK. YEL. BROWN (10YR 4/6)	
VERY FINE SAND	FRIABLE	LIGHT YELLOWISH BROWN	N.E.
"DEAD SAND"	FIRM	(2.5Y 6/4)	

Soil Profile 5 C
Classification Condition
Slope 1%
Limiting Factor 32" Depth
Ground Water Restrictive Layer Bedrock Pit Depth

Site Evaluator's Signature

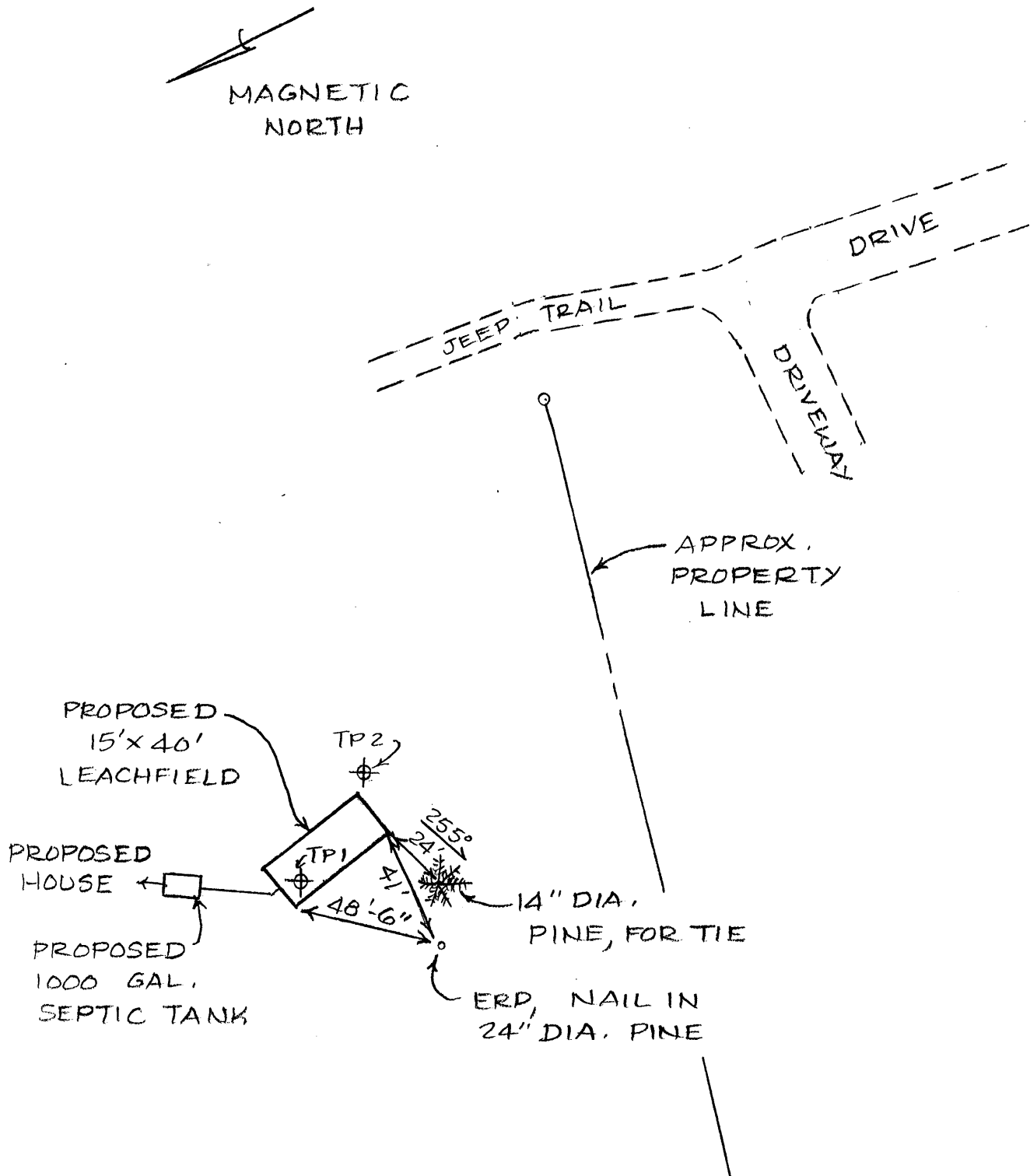
319
S. E. #

4-28-14
Date

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
LAMOINE	COOLIDGE CROSSING ROAD	DAN GARRISON

SITE PLAN:

SCALE: 1" = 50 FT.



W. G. 2. 7
Site Evaluator's Signature

319
S.E. #

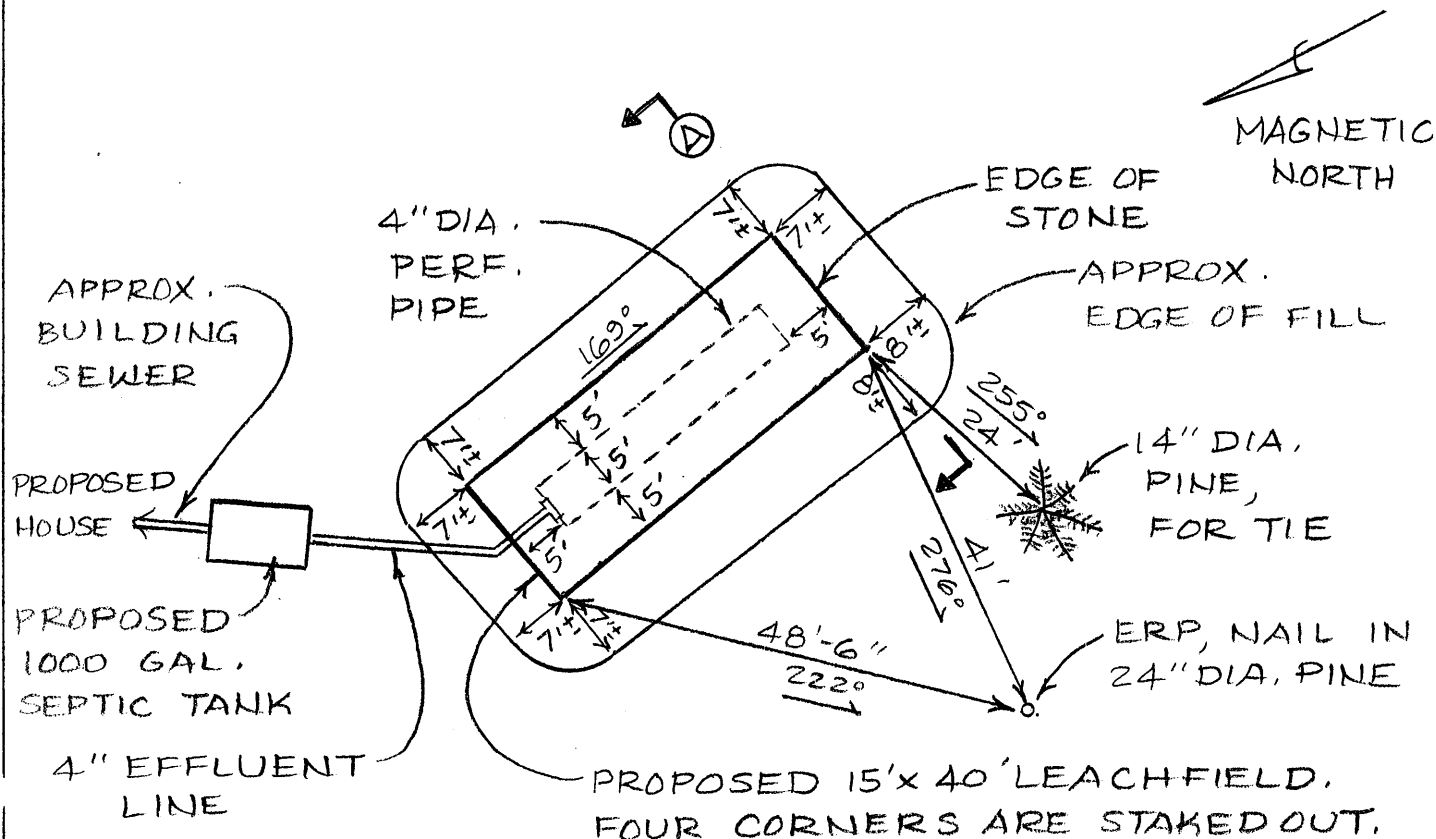
4-28-14
Date

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

Owner or Applicant Name

DAN GARRISON

SCALE: 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		SYSTEM:	PRIVY:	ELEVATION REFERENCE POINT
Depth of Backfill (Upslope)	<u>11 1/4"</u>	Finished Grade Elevation	<u>(CROWN) - 34"</u>			Location & Description <u>NAIL 36"</u>
Depth of Backfill (Downslope)	<u>11 1/4" - 13 1/4"</u>	Top of Distribution Pipe or Proprietary Device	<u>- 49"</u>		<u>N/A</u>	<u>ABOVE GROUND IN A 24"</u>
Depths @ cross-section shown below or on X-sec. detail.		Bottom of Disposal Field	<u>- 60"</u>			<u>DIA. PINE</u>
						Reference Elevation is: <u>0"</u>

DISPOSAL AREA CROSS SECTION (SEE ATTACHED CROSS SECTION)

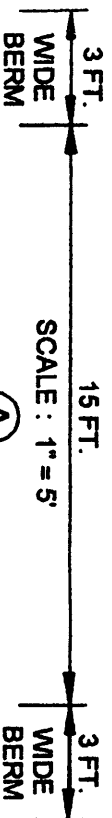
NOTES:

1. TANK(S) MUST BE 8' MINIMUM FROM BUILDING.
2. GRADE SURROUNDING AREA TO DIVERT SURFACE WATER AWAY FROM SYSTEM.
3. WELL TO BE 51' MINIMUM FROM SEPTIC TANK(S) AND 100' MINIMUM FROM DISPOSAL FIELD.
4. ALL WORK DONE ADJACENT TO WETLANDS AND WATER BODIES MUST BE DONE IN COMPLIANCE WITH SECTION 11-M OF THE SUBSURFACE WASTEWATER DISPOSAL RULES; EROSION AND SEDIMENT CONTROL MEASURES MUST BE IN ACCORDANCE WITH THE MARCH 2003 EDITION OF THE MAINE DEP HANDBOOK "MAINE EROSION AND SEDIMENT CONTROL BMPS" (DEPLW0588).
5. INSTALL SEPTIC TANK RISERS 18" IN DIAMETER "MINIMUM" TO WITHIN 6" OF FINISH GRADE ON INLET, CLEANOUT AND OUTLET COVERS (RECOMMEND EXTENDING RISERS TO FINISH GRADE).
6. FULL BASEMENT BELOW GRADE FOUNDATION, FROST WALL OR COLUMNS MUST BE 20' MINIMUM FROM EDGE OF DISPOSAL FIELD AND SLAB ON GRADE MUST BE 15' MINIMUM FROM EDGE OF DISPOSAL FIELD.

Date _____

DISPOSAL BED CROSS SECTION

NOTE: GRADE UPSLOPE TO DIVERT SURFACE WATER AWAY FROM SYSTEM.



FILL MATERIAL SHALL BE 8"-12" THICK OVER STONE AND SHALL BE GRAVELLY COARSE SAND TO THE STANDARDS IN SEC. 11-E IN THE SUBSURFACE RULES.

CROWN FINISH GRADE FROM CENTER AT 3 % SLOPE

2" COMPRESSED HAY (OR FILTER FABRIC) SEC. 11-F, PLACED OVER STONE.

REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER ENTIRE FILL AREA, SEC. 11-B.

ELEVATIONS:

ELEV. REF. PT. (ERP): 0"

FINISHED GRADE: -34" (CROWN)

TOP OF DISTRIBUTION PIPE: -49"

BOTTOM OF STONE: -60"

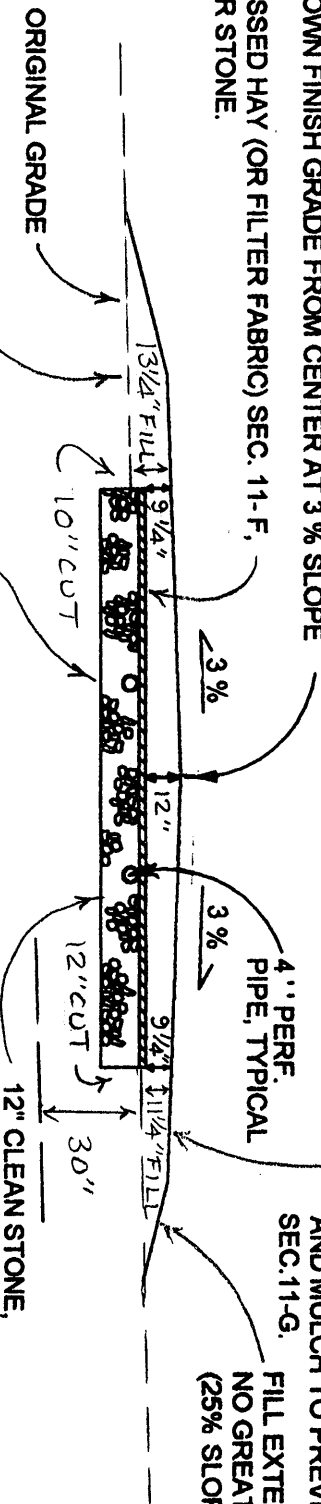
BOTTOM OF STONE MUST BE LEVEL WITH MAXIMUM GRADE TOLERANCE OF 2" PER 100'.

12" CLEAN STONE, (1 1/2" DIA.), UNIFORM SIZE.

THOROUGHLY MIX, DISK OR ROTO-TILL CLEAN, COARSE, SHARP SAND INTO TOP 4 INCHES OF ORIGINAL SOIL TO CREATE A TRANSITION ZONE, SEC. 11-B.

TOP 4" OF FILL TO BE A GOOD LOAM SOIL MIX TO ESTABLISH A GOOD VEGETATIVE COVER, SEED AND MULCH TO PREVENT EROSION, SEC. 11-G.

FILL EXTENSIONS NO GREATER THAN 4:1, (25% SLOPE).



NOTE: SYSTEM MUST BE INSTALLED ACCORDING TO THE RULES AND PRACTICES SET FORTH IN THE MOST CURRENT VERSION OF THE STATE OF MAINE SUBSURFACE WASTEWATER DISPOSAL RULES. INSTALLATION CONTRACTOR MUST BE FAMILIAR WITH SAID RULES AND CONSTRUCT SYSTEM IN FULL COMPLIANCE WITH SECTION 11 OF SAID RULES.

OWNER: DAN GARRISON

LOCATION: LANOINE

WILLIAM A. LABELLE, JR.

S.E.#

DATE

319

4-28-14